

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------------------------|
| FEE DETERMINATION | | | BEST AVAILABLE COPY |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | R.B | 1026 | 11/06/01 |
| RESPONSE FORMALITY REVIEW | TA | 1113 | 03-19-02 |

INDEX OF CLAIMS

| | | | |
|------------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral)... | Canceled | A | Appeal |
| — | Restricted | O | Objected |

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 ✓ | 12/30/02 |
| 2 N | |
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| Claim | Date |
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| 150 | |

If more than 150 claims or 10 actions
staple additional sheet here

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C-156
C-157

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